Campaigning for fruit consumption

2049. SHRI VIJAY J. DARDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that vitamin-rich fruits (like Guava-high in fibre, vitamin E content, lemon and Lime-rich source of vitamin C, Mango-high in fibre beta carotene, Orange-with lots of vitamin C, folate and fibre, Papaya-high in calcium, folic acid, vitamin C, fibre and carotenolds) are not being given adequate publicity either through print or electronic media, keeping in view the dictum "Precaution is better than Cure" and

(b) if so, whether the Departments like Ayurvedic, Unani, Naturopathy, etc. would been en-couraged to undertake such campaigns, especially among less educated and ill-informed sectors of population, in semi-urban and rural areas?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) and (b) Fruits and vegetables are good sources of vitamins, minerals and fibres. Their consumption is advocated through various media including electronic and print media such as:

(i) There are 43 Community Food and Nutrition Extension Units (CFNEUs) of Food and Nutrition Board, Ministry of Women and Child Development in 29 States and UTs which conduct 5 days training courses in fruits and vegetables preservation and nutrition where consumption of fruits and vegetables are advocated.

(ii) Charts and posters to be used as IEC material have been developed and disseminated to the States/Union Territories.

(iii) Advertisements are published in Hindi, English and all regional languages describing the importance of consumption of fruits and vegetables on occasions such, as National Nutrition Week (1-7 September, 2006) and World Food Day.

(iv) Various audio video spots on nutrition highlighting the importance of consumption of fruits and vegetables prepared by the Ministry of

Women and Child Development are also issued through the electronic media.

(v) Under the National Rural Health Mission (NRHM) Nutiriton has been given priority. Monthly Health and Nutrition Days are organised in Anganwadi's to creat awareness on the subject. Besides ASHAs (Accredited Social Health Activists) selected under NRHM are to educate the community on such matters.

Primary healthcare system

2050. SHRI RAVULA CHANDRA SEKAR REDDY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that to improve the primary healthcare system, the Eleventh Five Year Plan would initially lay emphasis on integrated district health plans and later on block specific health schedules;

(b) if so, the details thereof;

(c) the present status thereof;

(d) whether any shortcomings were noticed during the implementation; and

(e) if so, the details thereof and the reasons therefor?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (e) In order to improve the primary healthcare system, the Eleventh Five Year Plan lays emphasis on integrated district and block specific health plans. These plans have sector wide approach and also address the initiatives related to other health related sectors.

Under National Rural Health Mission (NRHM) Integrated District Health Action Plans (DHAP) have till date, been prepared by over 130districts. These plans are appraised by the States and collated into the State Programme Implementation Plan (PIP). The State PIPs are appraised and approved by National Programme Coordination Committee at the GOI level. The implementation of State PIPs is regularly monitored in terms of agreed performance indicators and corrective action as required suggested to the States.